PE	2:42PM			RANSMITTAL uil Mail Stop ISSUE	NO. 8380	P. 3
MAR 1 & 2006	form, together with	applicable fee(Commissioner for P.O. Box 1450 Alexandria, Virgi	r Patents	
MAR I			or F	(571) 273-2885	red Blocks 1 through 5 sh	ould be completed who
VSTRUCTIONS: This for ppropries. All further con- adicated larges corrected.	National de used for trans coordence including the P flow or directed otherwise	mitting the ISSUE leatent, advance order in Block 1, by (a) sp	FEE and Purification of the pecifying a second of the pecifying a seco	JBLICATION FEE (if requiration of maintenance fees where correspondence address; Note: A certificate of	ill be mailed to the current and/or (b) indicating a sepa	correspondence address
CURRENT CORRESPONDENCE	ADDRESS (Adds: Off Lives) to	eny change of addr∞)		Note: A certificate of fex(a) Transmittal. Thi papers. Each additiona have its own certificate	mailing can only be used for a certificate cannot be used for l paper, such as an assignme of mailing or transmission.	r domestic mailings of or any other accompany nt or formal drawing, m
27871 759	% 12/14/2005 LS & GRAYDON L	LP				ll_m
BOX 25 COMME	RCE COURT WEST			I hereby certify that the States Postal Service y	tificate of Mailing or Trans is Foc(s) Transmittal is boin with sufficient postage for fir I Stop ISSUE FEE address TO (571) 273-2885, on the d	at class mail in an envel
199 BAY STREET	, SUITE 2800		•	addressed to the Mai transmitted to the USP	TO (571) 273-2885, on the d	ate indicated below.
TORONTO, ON M	5L 1A9					(Depositor's na
2006 TRESHARE 0000008	35 022553 10017509					(Signal
1400.00 DE						
1504 300.00 De	<u></u>	P10	RST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLICATION NO.	FILING DATE		eter J. Ashv		00430-0007	6509
10/017 ,509	12/18/2001	•		I STATE FOR NETWORKS		
APPLN. TYPE	SMALL ENTITY	24.400		PUBLICATION FEE	TOTAL FEE(S) DUE	03/14/2006
nonprovisional	NO	\$1400		\$300	\$1700	03/14/2006
	NO	\$1400 ART UNIT		\$300 CLASS-SUBCLASS		03/14/2006
nonprovisional EXAM TON, E	NO IINER DANG T	ART UNII 2666	r	\$300 CLASS-SUBCLASS 370-503000	\$1700	03/14/2006
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1.363).	NO INER DANG T e address or indication of "F	ART UNII 2666 Pee Address" (37	2. For prin (1) the name of agents (\$300 CLASS-SUBCLASS 370-S03000 ting on the patent front page, I nees of up to 3 registered patents of the patent front page.	\$1700	
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1.363). Change of correspon Address form PTO/SB/1 Tee Address indica PTO/SB/47; Rev 03-02 Number is required.	NO INER DANG T de address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us	ART UNIT 2666 Fee Address" (37 f Correspondence eation form se of a Customer	2. For prin (1) the nar or agents 0 (2) the rar registered 2 registere listed, no r	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I nes of up to 3 registered patent Page of a single front (having as attorney or agent), and the naid patent attorneys or agents. I same will be printed.	\$1700	03/14/2006 Cassels + Gr R.S. Orange
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1.363). Change of correspondence Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	NO MINER DANG T e address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Use	ART UNIT 2666 Pee Address" (37 f Correspondence eation form se of a Customer	2. For prin (1) the nar or agents C (2) the nar registered 2 registered listed, no r	\$300 CLASS-SUBCLASS 370-S03000 ting on the patent front page, I mes of up to 3 registered pate DR, alternatively, ne of a single firm (baving as attorney or agent) and the nat d patent attorneys or agents. I same will be printed.	s1700 ist int attorneys 1 Blake a member 2 nes of up to r no name is 3	. Cassels + Gu R.S. Orange.
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1.363). Change of correspondence Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	NO MINER DANG T e address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Use	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON TE below, no assigned d of this form is NOT	2. For prin (1) the nar or agents of (2) the rar registered 2 registere listed, no r HE PATENT lata will app a substitute	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent?, alternatively, no as torney or agent; and the nad d patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assignment.	sist int attorneys a member a nes of up to f no name is mee is identified below, the	. Cassels + Gu R.S. Orange.
DEXAM TON, I 1. Change of correspondence CPR 1.363). Change of correspond Address form PTO/SB/1 Tee Address' Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN	NO INER DANG T de address or indication of "E dence address (or Change of 22) attached. tion (or "Foe Address" Indic or more recent) attached. Us D RESIDENCE DATA TO s an assignce is identified to n 37 CFR 3.11. Completion	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON TE below, no assigned de n of this form is NOT	2. For prin (1) the nar or agents 0 (2) the nar registered 2 registered listed, no r HE PATENT lans will app a substitute (1) RESIDENC	\$300 CLASS-SUBCLASS 370-S03000 ting on the patent front page, I mes of up to 3 registered pate DR, alternatively, ne of a single firm (baving as attorney or agent) and the nar d patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assignment. CE: (CITY and STATE OR CO	sist mt attorneys a member a nes of up to f no name is mee is identified below, the	. Cassels +Go R.S. Orange.
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1.363). Change of correspond Address form PTO/SB/1 Tee Address form PTO/SB/1 ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i (A) NAME OF ASSIGN	NO INER DANG T de address or indication of "E dence address (or Change of 22) attached. tion (or "Foe Address" Indic or more recent) attached. Us D RESIDENCE DATA TO s an assignce is identified to n 37 CFR 3.11. Completion IEE WOCKS Limit	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON TE below, no assigned de n of this form is NOT (B)	2. For prin (1) the nar or agents 0 (2) the nar registered 2 registered isted, no r HE PATENT lata will app a substitute RESIDENC	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent R, alternatively, and of a single firm (baving as attorney or agent) and the nat d patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assign for filing an assignment. E: (CITY and STATE OR COLLARY	sist mt attorneys a member a nes of up to f no name is mes is identified below, the DUNTRY) ANAOA	Cassels + Gr R.S. Orange document has been filed
nonprovisional EXAM TON, I. 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NOTEL Net	MO INER DANG T de address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Use DRESIDENCE DATA TO s an assignce is identified to n 37 CFR 3.11. Completion IEE BE assignce category or category or category.	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON TE below, no assigned de n of this form is NOT (B)	2. For prin (1) the nar or agents C (2) the rar registered 2 registere listed, no r HE PATENT lata will app a substitute RESIDENC \$^2 7. Inted on the p	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent? alternatively, no satorney or agent; and the naid patent attorneys or agents. I name will be printed. (print or type) car on the patent, If an assignment. E: (CITY and STATE OR COLORS) AURGAT, Coloratent; I fail and a satorneys or agents. I fail and a satorneys or the patent. E: (CITY and STATE OR COLORS)	sist mt attorneys a member a nes of up to f no name is mee is identified below, the	Cassels + Gr R.S. Orange document has been filed
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1,363). Change of correspondence Address form PTO/SB/1 "Tee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN **CONTROL OF ASSIGN **Please check the appropriate 4a. The following fee(s) are	MO INER DANG T de address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Use DRESIDENCE DATA TO s an assignce is identified to n 37 CFR 3.11. Completion IEE BE assignce category or category or category.	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON TE below, no assigned d n of this form is NOT (B) gories (will not be printed to the print	2. For prin (1) the nar or agents O (2) the nar registered 2 registere issted, no r HE PATENT lata will app a substitute RESIDENC ST. nated on the p	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent?, alternatively, no do a single farm (having as attorney or agent) and the naid patent attorneys or agents. I name will be printed. ((print or type) car on the patent. If an assignment. E: (CITY and STATE OR COLORS (CITY and STATE OR COLORS). AURENT, Coloratent): Individual Coloratent): Individual Coloratent):	sist mt attorneys a member a nes of up to f no name is mee is identified below, the DUNTRY) ANADA Corporation or other private g	Cassels + Gr R.S. Orange document has been filed
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1,363). Change of correspondence CPR 1,363). The Address indica PTO/SB/17; Rev 03-02 Number is required. 3. ASSIGNE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NOTEL NAME Please check the appropriate 4a. The following fee(s) are Extense fee	MO INER DANG T e address or indication of "I dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO s an assignce is identified I n 37 CFR 3.11. Completion IEE E assignce category or category a coclosed:	ART UNIT 2666 Fee Address" (37 If Correspondence cation form se of a Customer BE PRINTED ON TR below, no assigned d of this form is NOT (B) cories (will not be printed)	2. For prin (1) the nar or agents O (2) the nar registered 2 registered isted, no r HE PATENT lata will app a substitute RESIDENC ST. nated on the p Psyment of A check	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent?, alternatively, no do a single farm (having as attorney or agent) and the naid patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assignment. E: (CITY and STATE OR COLORS) AURENT, Colors patent): Individual Fec(s): in the amount of the fee(s) is e	sist mt attorneys a member a nes of up to f no name is mee is identified below, the DUNTRY) ANADA Corporation or other private genelosed.	Cassels + Gr R.S. Orange document has been filed
nonprovisional EXAM TON, I 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN Please check the appropriate 4a. The following fee(s) are Extra contaction for (No	MO INER DANG T e address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us RESIDENCE DATA TO s en assignce is identified to n 37 CFR 3.11. Completion VEE the assignce category or category a enclosed: small entity discount permit	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON TE below, no assigned d n of this form is NOT (B) cories (will not be printed)	2. For prin (1) the name of agents (2) the name of agents (2) the name of agents (2) the name of a substitute (2) RESIDENCE (3) RESIDENCE (4) Payment of Payment of Payment of Payment of the prayment of the	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent?, alternatively, ne of a single frim (having as attorney or agent) and the naid patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assignment. (E: (CITY and STATE OR COLLECTY and STATE OR COLLECTY): Individual Constant): Individual Constant): Individual Constant in the amount of the fee(a) is a by credit card, Form PTO-20.	sist mt attorneys a member a nes of up to f no name is mee is identified below, the DUNTRY) ANADA Corporation or other private a melosed. 38 is attached.	Cassels + Grange. Consider the control of the cont
nonprovisional EXAM TON, I 1. Change of correspondence CPR 1.363). Change of correspondence CPR 1.363). The Address indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN COTTO Please check the appropriate The following fee(s) are Tesue Fee Fublication Fee (No Advance Order - # 6	MO INSER DANG T e address or indication of "E dence address (or Change of 22) attached. Lion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO s en assignce is identified to n 37 CFR 3.11. Completion IEE E assignce category or category c enclosed: small entity discount permit of Copies	ART UNIT 2666 Fee Address" (37 f Correspondence cation form se of a Customer BE PRINTED ON Tr below, no assigned d of this form is NOT (B) corries (will not be printed)	2. For prin (1) the name of agents (2) the name of agents (2) the name of agents (2) the name of a substitute (2) RESIDENCE (3) RESIDENCE (4) Payment of Payment of Payment of Payment of the prayment of the	\$300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered patent?, alternatively, no do a single farm (having as attorney or agent) and the naid patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assignment. E: (CITY and STATE OR COLORS) AURENT, Colors patent): Individual Fec(s): in the amount of the fee(s) is e	sist mt attorneys a member a nes of up to f no name is mee is identified below, the DUNTRY) ANADA Corporation or other private a melosed. 38 is attached.	Cassels + Grange. Consider the control of the cont
nonprovisional EXAM TON, I 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNE NAME ANT PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN Please check the appropriate 4a. The following fee(s) are Expublication Fee (No Advance Order - # 6 5. Change in Entity Statu	NO INTER DANG T e address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO s an assignce is identified in 37 CFR 3.11. Completion IEE E assignce category or category c enclosed: small entity discount permit of Copies s (from status indicated abory SMALL ENTITY status Se	ART UNIT 2666 Fee Address* (37 f Correspondence cation form se of a Customer BE PRINTED ON TR below, no assigned d of this form is NOT (B) cories (will not be printed)	2. For prin (1) the nar or agents (2) the nar registered 2 registere listed, no r HE PATENT lata will app a substitute RESIDENC ST. nted on the p Payment of A check Payment of Payment of Deposit Acc	S300 CLASS-SUBCLASS 370-S03000 ting on the patent front page, I mes of up to 3 registered pate DR, alternatively, ne of a single firm (baving as attorney or agent) and the nar d patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assig for filing an assignment. (E: (CITY and STATE OR COLLECTY AND STATE O	sist mt attorneys a member a nes of up to f no name is mee is identified below, the DUNTRY) ANADA Corporation or other private genclosed. 38 is attached. charge the required fee(s), of (enclose an extra ALL ENTITY status. See 37	cosses + Grange. Cosses + Grange. Cocument has been filed from the component of this form).
nonprovisional EXAM TON, I 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNE NAME ANT PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN Please check the appropriate 4a. The following fee(s) are Expublication Fee (No Advance Order - # 6 5. Change in Entity Statu	NO INTER DANG T e address or indication of "E dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO s an assignce is identified in 37 CFR 3.11. Completion IEE E assignce category or category c enclosed: small entity discount permit of Copies s (from status indicated abory SMALL ENTITY status Se	ART UNIT 2666 Fee Address* (37 f Correspondence cation form se of a Customer BE PRINTED ON TR below, no assigned d of this form is NOT (B) cories (will not be printed)	2. For prin (1) the nar or agents (2) the nar registered 2 registere listed, no r HE PATENT lata will app a substitute RESIDENC ST. nted on the p Payment of A check Payment of Payment of Deposit Acc	S300 CLASS-SUBCLASS 370-503000 ting on the patent front page, I mes of up to 3 registered pate DR, alternatively, ne of a single firm (baving as attorney or agent) and the nar d patent attorneys or agents. I name will be printed. (print or type) car on the patent. If an assignment. (E: (CITY and STATE OR COLLECTY and STATE OR COLLECTY): Individual Prec(a): in the amount of the fee(a) is early credit card. Form PTO-20 cotor is hereby authorized by sount Number 22 22	sist mt attorneys a member a nes of up to f no name is mee is identified below, the DUNTRY) ANADA Corporation or other private genclosed. 38 is attached. charge the required fee(s), of (enclose an extra ALL ENTITY status. See 37	cosses + Grange. Cosses + Grange. Cocument has been filed from the component of this form).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or remin a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Under the Parternack Patients Address of the Commissioner for Patents, P.O. Box 1450, Under the Parternack Patients Address of the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

ASSELS & GRAYDON LLP

Facsimile: 416.863.2653 Box 25, Commerce Court West

199 Bay Street

Toronto, Ontario, Canada

M5L 1A9

THE OF PAGES INCLUDING COVER PAGE:

DATE:

March 14, 2006

TO: (Name, Company, City & Country)

John R. S. Orange

FACSIMILE:

TELEPHONE:

United States Patent & Trademark Office,

571,273,2885

ISSUE FEE

FROM:

Alexandria, VA

BUSINESS PHONE:

416-863-3164

SECRETARY PHONE:

416-863-4340

MESSAGE:

Application No.	10/017,509
Applicant:	ASHWOOD SMITH, Peter J., et al.
Title:	Resynchronization of Control and Data Path State for Networks
Art Unit:	2666
Customer No.	27871

ORIGINALS SENT BY: (check one)	□ MAIL	TDX	☑ NOT SENT	(dans == 1/4)
				(please specify)

ANY PROBLEMS? Please contact your Fax Operator or the Blakes Fax Operator at

CONFIDENTIALITY NOTE:

This message is CONFIDENTIAL and is legally privileged. It is intended only for the person(s) or organization(s) named above and any other use or disclosure is strictly forbidden. If this message is received by anyone else, please notify us at once by telephone and return the original by mail to the above address. Thank You.

FILE REFERENCE:	64457/15		
TIME IN:	TIME SENT:	OPERATOR:	

	4. 2006_ 2:42PM				30 <u> </u>
TRA	NSMITTAL OF PAYME	NT OF ISSUE FEE F.R. 1.311)	(Large Entity)	111	et No. 457/15
polidan	t(s): ASHWOOD SMITH, Peter	r J.			
фричан	MAR 1 4 2006			•	
Applio	Ign No. Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No 6509
10/01	7,3004064 12/18/2001	TON, Dang T.	27871	2000	0303
Inventio	n: Resynchronization of Cont	rol and Data Path State	for Networks		
		Mail Stop Iss COMMISSIONER FO P.O. Box Alexandria, VA	OR PATENTS 1450 22313-1450		
	ted herewith are the following t		application.		
3 1881	ue Fee Transmittal Form PTOI			Plant Fee:	
	11y 1 CC. 31400.00	Design Fee:		Plant ree:	
	blication Fee: \$ 300.00				
□ Ac	check in the amount of	is attached		02-255	3
	e Director is hereby authorized	to charge and credit of	eposit Account No.	02-255	•
85	described below. Charge the amount of	\$1,700.00		•	
		·			
¬	yment by credit card. Form PT				
□ Pa W/ be	ARNING: Information on this included on this form. Provi	form may become pu ide credit card informa	ıblic. Credit card info ation and authorizati	rmation should on on PTO-2038	not 3.
	Signature		Dated: March 14, 2	006	
John	R. S. Orange (Reg. No. 29,725)			
Blake	e, Cassels & Graydon LLP Box 25, Commerce Court West		•		
Torre	nto, Ontario, M5L 1A9				
Cana					
•					
		•			
:C:	Certificate of Transmission	hv Facsimile			
	This certificate may only be	used if paying	Certificate of l	Mailing by First Cl	lass Mail
Ti -	by deposit account and authorized that this document and authorized		I hereby certify that this	correspondence is t	eing deposited with
acc	count is being facsimile transmitted to	the United States Patent	the United States Postal	Service with sufficient	ent postage as first
and	d Trademark Office (Fax No.	571.273.2885	class mail in an envelope P.O. Box 1450, Alexandris	addressed to "Comm a. VA 22313-1450" [3	issioner for Patents, 7 CFR 1.8(a)) on
	March 14 more			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
-	March 14, 2006 (Date)			·	
	111		(Date)		
	1111				
	Signature		Signature of Po	erson Mailing Corresp	ondence
	John R. S. Oran	ige			
-	Typed or Printed Name of Person Sign		Typed or Printed Nan	se of Person Mailing (Correspondence

POSLARGE/REVOS